



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No.	:	10/630,351
Applicants	:	Andrew Gordon et al.
Filed	:	July 30, 2003
Examiner	:	Unassigned
Art Unit	:	Unassigned
Attorney Docket No.	:	37861/277592

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PRELIMINARY AMENDMENT

Sir:

Please accept this preliminary amendment and amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.



10-29-03

Exprss Mail No.: EV 127539785 US

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/630,351	
	Filing Date	July 30, 2003	
	First Named Inventor	Andrew Gordon	
	Art Unit	Unassigned	
	Examiner Name	Unassigned	
Total Number of Pages in This Submission	6	Attorney Docket Number	37861/277592

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Express Mail Certificate; Return Postcard		
<table border="1"><tr><td>Remarks</td><td></td></tr></table>			Remarks	
Remarks				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Samuel B. Rollins, Reg. No. 52,180 Kilpatrick Stockton LLP
Signature	
Date	October 28, 2003

CERTIFICATE OF MAILING

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Serial No.: 10/630,351

Date Filed: July 30, 2003

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Robin Leigh